|  |  |  |
| --- | --- | --- |
| Dept of Safety & Professional ServicesIndustry Services Division | Wisconsin Uniform CampingPermit Application | Application No.      |
| Wisconsin Stats. 101.63(1), 101.82(1) and 145.02(2)(b) | The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m)] | Parcel No.      |
| **PERMIT REQUESTED** | [ ]  Construction **[ ]**  HVAC **[ ]**  Electric **[ ]**  Plumbing **[ ]** Other: |
| Owner’s Name      | Mailing Address      | Tel.      |
| Contractor Name & Type | Lic/Cert#  | Exp Date | Mailing Address | Telephone & Email |
| HVAC      |       |       |       |            |
| Electrical Contractor      |       |       |       |            |
| Electrical Master Electrician      |       |       |       |            |
| Plumbing      |       |       |       |            |
| **PROJECT LOCATION** | Lot area      Sq.ft. | **[ ]** Town **[ ]** Village **[ ]** City of        |       1/4,       1/4, of Section      , T       N, R       E/W |
| Building Address      | County      | Campground Name      | Lot No.      | Block No.      |
| **1. PROJECT** |  | **3. CONST. TYPE** | **6. WALLS** | **8. HVAC EQUIP.** | **11. ENERGY SOURCE** |
| **[ ]**  New | **[ ]**  Change of Use | **[ ]**  Site Built | **[ ]** Wood Frame | **[ ]** Furnace | Fuel | Nat  | LP | Oil | Elec | Solid | Solar |
| **[ ]**  Alteration | **[ ]** Other |  | **[ ]**  Steel | **[ ]** Radiant Basebd |  | Gas |  |  |  |  | Geo |
| **[ ]**  Addition |  | **[ ]**  Other: | [ ]  ICF | **[ ]** Heat Pump | Space Htg | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|  |  |       | [ ]  Timber/Pole | **[ ]** Boiler | Water Htg | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|  |  | [ ]  Other: | [ ]  Central AC |  |
| **2. AREA INVOLVED (sq ft)** | **4. STORIES** |        | [ ]  Fireplace |  |
|  | **Camping Unit** | **[ ]**  1-Story | **7. USE** | [ ]  Other | **12. EST. BUILDING COST w/o LAND** |
| Living Area |  | **[ ]** 2-Story | **[ ]**  Seasonal | [ ]  None | $       |
| [ ]  Other |  | **9. SEWER** |  |
| Deck/Porch |       |  | **[ ]**  Other: | [ ]  Municipal |  |
| **5. ELECTRIC** |  | [ ]  Sanitary Permit |  |
| Totals |       | Entrance Panel |  | [ ]  Transfer Tank |  |
| Amps:       |  | **10. WATER** |  |
| **[ ]**  Underground |  | **[ ]**  Municipal |  |
| **[ ]**  Overhead |  | **[ ]**  On-Site Well |  |
| I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. **□ I vouch that I am or will be an owner occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the second page of this form.**  |
| **APPLICANT (Print:) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **APPROVAL CONDITIONS** | This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. **[ ]  See attached for conditions of approval.** |
|  |
|  |
|  |
| **ISSUING JURISDICTION** | [ ]  Town [ ]  Village [ ]  City [ ]  County [ ]  State | State-Contracted Inspection Agency#:      | Municipality Number of Dwelling Location                              |
| **FEES:** | **PERMIT(S) ISSUED** | **PERMIT ISSUED BY:** |
| Plan ReviewInspectionWis. InsigniaOtherTotal | $      $      $      $      $       |  **[ ]**  Construction **[ ]**  HVAC **[ ]**  Electrical **[ ]**  Plumbing **[ ]**  Other | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cert No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 9490IS (05/18) |